Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

10/788,747

| CLAIMS AS FILED - PART (Column 1)  |   |   |              |                               | (Column 2)                   |                  |   | SMALL ENTITY TYPE |                        | OR                  | OTHER THAN OR SMALL ENTITY |                        |
|--|---|---|--------------|-------------------------------|------------------------------|------------------|---|-------------------|------------------------|---------------------|----------------------------|------------------------|
| TOTAL CLAIMS   |   |   | 67           |                               |                              |                  |   | RATE              | FEE                    |                     | RATE                       | FEE                    |
| FOR  |   |   | NUMBER FILED |                               | NUMBER EXTRA                 |                  |   | BASIC FEE         | 385.00                 | OR                  | BASIC FEE                  | 770.00                 |
| TOTAL CHARGEABLE CLAIMS  |   |   | 78 minus 20= |                               | * 58                         |                  |   | X\$ 9=            | 522                    | OR                  | X\$18=                     |                        |
| IND  | EPENDENT CL   | AIMS                                      | 7 minus 3 =  |                               | * 4                          |                  |   | X43=              | 172                    | OR                  | X86=                       |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT   |   |   |              |                               |                              |                  |   | +145=             | 145                    | OR                  | +290=                      |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |   |   |              |                               |                              |                  | 1 | TOTAL             | 1210                   | OR                  | TOTAL                      |                        |
| (Column 1) (Column 2) (Column 3)   |   |   |              |                               |                              |                  | _ | SMALL E           | NTITY                  | OR                  | OTHER<br>SMALL             | ENTITY                 |
| AMENDMENT A  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>DUSLY                 | PRESENT<br>EXTRA |   | RATE              | ADDI-<br>TIONAL<br>FEE |                     | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus        | **                            |                              | =                |   | X\$ 9=            |                        | OR                  | X\$18=                     |                        |
|  | Independent   | *   | Minus        | ***                           |                              | =                |   | X43=              |                        | OR                  | X86=                       |                        |
| 4  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |              |                               |                              |                  |   | +145=             |                        | OR                  | +290=                      |                        |
| TOTAL ADDIT. FEE   |   |   |              |                               |                              |                  |   |                   | OR                     | TOTAL<br>ADDIT. FEE |                            |                        |
|  |   | (Column 1)                                |              | (Colu                         | mn 2)                        | (Column 3)       |   |                   |                        |                     |                            |                        |
| AMENDMENT B  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | PREVI                         | HEST<br>BER<br>OUSLY<br>FOR  | PRESENT<br>EXTRA |   | RATE              | ADDI-<br>TIONAL<br>FEE |                     | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus        | **                            |                              | =                |   | X\$ 9=            |                        | OR                  | X\$18=                     |                        |
| N LL   | Independent   | *   | Minus        | ***                           |                              | =                |   | X43=              |                        | OR                  | X86=                       |                        |
| 4  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +  |   |              |                               |                              |                  |   | +145=             |                        | OR                  | +290=                      |                        |
| TOTAL<br>ADDIT. FEE  |   |   |              |                               |                              |                  |   |                   |                        | OR                  | TOTAL<br>ADDIT, FEE        |                        |
| (Column 1) (Column 2) (Column 3)   |   |   |              |                               |                              |                  |   |                   |                        |                     |                            |                        |
| AMENDMENT C  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | NUM<br>PREVI                  | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |   | RATE              | ADDI-<br>TIONAL<br>FEE |                     | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus        | **                            |                              | =                |   | X\$ 9=            | :                      | OR                  | X\$18=                     |                        |
|  | Independent   | *   | Minus        | ***                           |                              | =                | 4 | X43=              |                        | OR                  | X86=                       |                        |
| Ľ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145=  |   |              |                               |                              |                  |   |                   |                        | OR                  | +290=                      |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** TOTAL OR ADDIT FEE |   |   |              |                               |                              |                  |   |                   |                        |                     |                            |                        |
| **   | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |              |                               |                              |                  |   |                   |                        |                     |                            |                        |